

BAKER BOTTS LLPAMENDMENT TRANSMITTAL
PATENTOur File No.: A34762 - 0216480105Date: March 25, 2002RECEIVED
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TECHNICAL CENTER 1600/2900

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Lo et al.

Serial No. : 08/753,750 Examiner : A. Harris

Filed : November 29, 1996 Group Art Unit: 1642

For : TRANSFERRIN BINDING PROTEINS OF PASTEURELLA
HAEMOLYTICA AND VACCINES CONTAINING SAME

EXPRESS MAIL - LABEL NO.: EU206387699US

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is:

- ☒ [X] An Amendment in response to the October 23, 2001 Office Action for the above-identified patent application.
- ☒ [X] Fee Calculation.
- ☒ [X] Check in the amount of \$200.00 in payment of the three month extension of time.
- ☐ [] Please charge our Deposit Account No. 02-4377 in the amount of \$_____. Duplicate copies of this sheet are enclosed.
- ☒ [X] In the event that an extension of time is required in connection with this submission, including an extension of time under 37 C.F.R. § 1.136, applicants request such an extension and authorize the Commissioner to charge payment of any extension of time fee to Deposit Account No. 02-4337. Duplicate copies of this sheet are enclosed.
- ☒ [X] The Commissioner is hereby authorized to charge payment of any additional filing fees required, including and fees due under 37 C.F.R. § 1.16 and/or 37 C.F.R. § 1.17 or to credit any overpayment to Deposit Account No. 02-4337. Duplicate copies of this sheet are enclosed.

BAKER BOTTS LLP

The Fee has been calculated as shown below:

The Fee has been calculated as follows:															
		Claims remaining after amendt. (Col. 1)		Highest No. Prev. Paid for (Col. 2)		Present extra (Col. 3)	SMALL ENTITY				OTHER THAN A SMALL ENTITY				
							RATE		FEE		RATE		FEE		
Total	*	45	Minus **	48	=	0	X	9	=	0	X	18	=		
Ind.	*	5	Minus ***	6	=	0	X	42	=	0	X	84	=		
() First Presentation of Multiple Dependent Claims							+	140	=		+	280	=		
TOTAL ADDITIONAL FEE:												TOTAL:			

* If the entry in Col 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. prev. paid for" in this space is less than 20, write "20" in this space.

*** If the "Highest No. prev. paid for" in this space is less than 3, write "3" in this space.

[X] An Extension of Time to respond to the PTO communication dated October 23, 2001 is hereby requested. The required fee, indicated below, is enclosed herewith.

Extension for response (check only one):

	<u>SMALL ENTITY</u>		<u>OTHER THAN A SMALL ENTITY</u>	
Within first month	<input type="checkbox"/>	\$ 55	<input type="checkbox"/>	\$ 110
Within second month	<input checked="" type="checkbox"/>	200	<input type="checkbox"/>	400
Within third month	<input type="checkbox"/>	460	<input type="checkbox"/>	920
Within fourth month	<input type="checkbox"/>	720	<input type="checkbox"/>	1,440
<input type="checkbox"/> Other:				
[X] Total Fee Due: <u>\$ 200.00.</u>				

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